

RELEASE AUTHORIZATION

U.S. DEPARTMENT OF JUSTICE
FEDERAL BUREAU OF PRISONS

Inmate Name	Register No.	Institution	Date
Release Date	Method	Detainer:	<input type="checkbox"/> Yes <input type="checkbox"/> No

Custody Will Be Taken by:

CERTIFICATION: I certify that this release is in accordance with applicable and controlling rules, regulations and statutory provisions. I have personally reviewed this inmate's Judgment and Commitment File, and determined that there is no information that would prevent release by the method stated above. All Judgment and Commitment Orders, U.S. Parole Commission Warrants, Notice of Actions, Good Time Documents, and all detainer information have been personally reviewed by me.

Name/Title	Signature	Date
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Thumbprint

RELEASE ACTION

Identified by:	Release by:	
Funds Paid by:	Date of Release:	Time of Release:

RECEIPT OF AGENT TAKING CUSTODY

I have received the above named prisoner, together with personal property and funds in the amount of \$ _____

Name/Title	Signature	Date
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Location